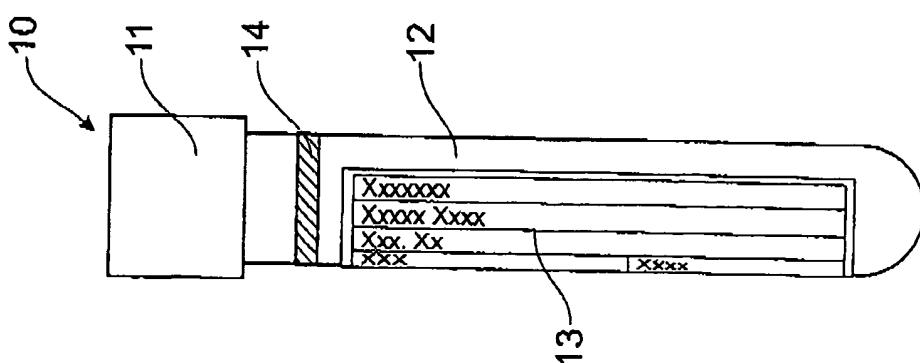
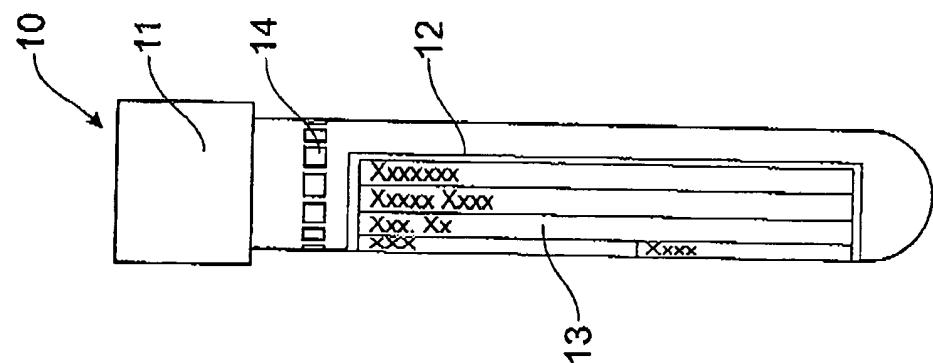
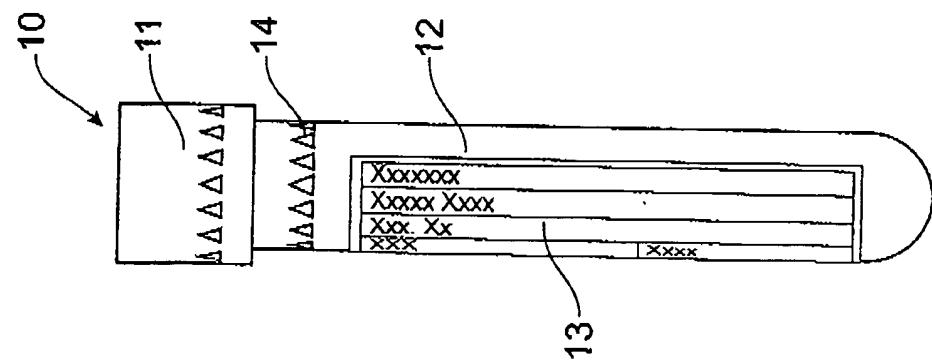
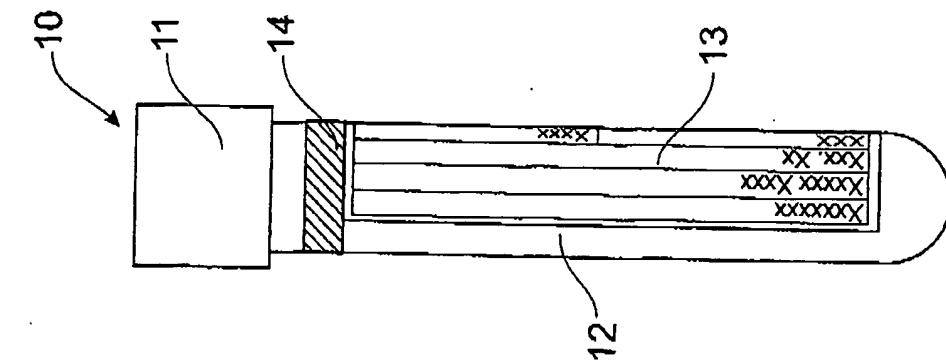


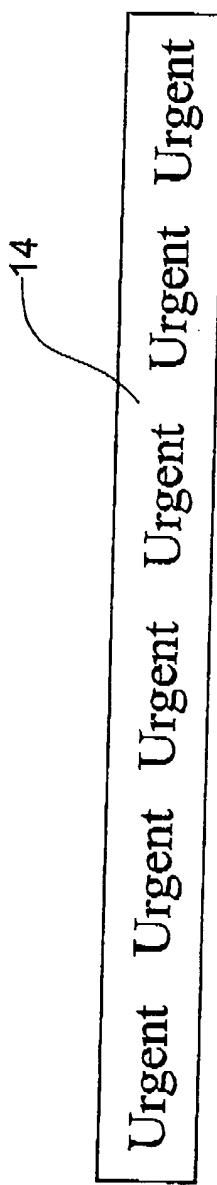
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Urgent	Urgent	Urgent	Urgent	Urgent
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FIG. 2A

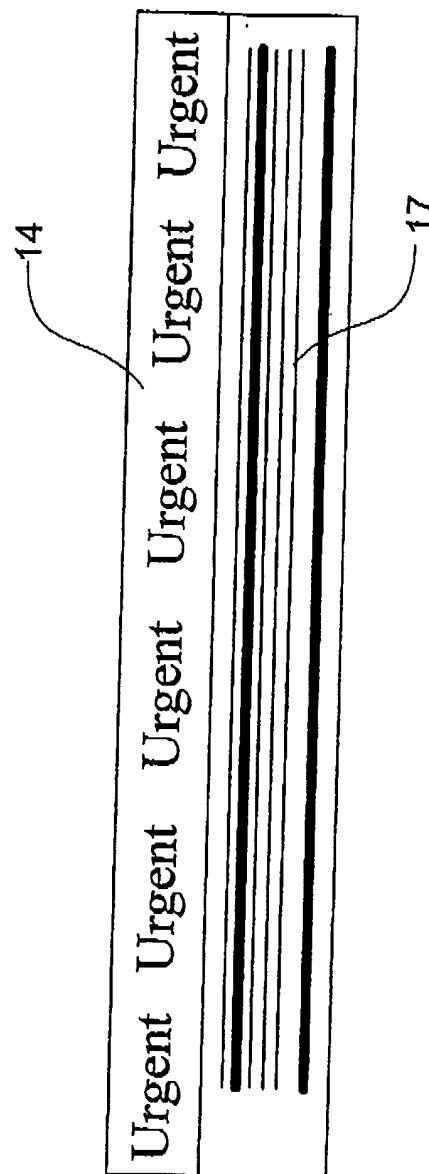


FIG. 2B

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Patient Name	Date of Birth	Signature of Collector
Patient Number		
Date of Collection	Time of Collection	
Ward/Clinic	Doctor	
Batch number 123456	Expiry Date 03/06	
Fill Line	Anticoagulant/Preservative (& name)	
Urgent Urgent Urgent Urgent Urgent		

13

16

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FIG. 2C

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27

Patient Name	Date of Birth
Patient Number	Signature of Collector
Date of Collection	Time of Collection
Ward/Clinic	Doctor
Batch number 123456	Expiry Date 03/06
Colour indicator	preservative (e name)
Anti-coagulant	Fill Line
Urgent	Urgent

16

17

FIG. 3A

FIG. 3A

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Patient Name	Date of Birth	Signature of Collector
Patient Number	Time of Collection	Doctor
Date of Collection	Ward/Clinic	Expiry Date 03/06
Batch number 123456	Preservative (if name) Anticoagulant	
Fill Line	Urgent Urgent Urgent Urgent Urgent Urgent	

16

17

FIG. 3B

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Urgent	Urgent	Urgent	Urgent	Urgent																									
<table border="1"> <tr> <td rowspan="5"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">  Urgent </div> </td> <td>Fill Line</td> <td>Anti-coagulant</td> <td>Preservative (& name)</td> <td></td> </tr> <tr> <td>Patient Name</td> <td></td> <td>Date of Birth</td> <td></td> </tr> <tr> <td>Patient Number</td> <td></td> <td>Signature of Collector</td> <td></td> </tr> <tr> <td>Date of Collection</td> <td></td> <td>Time of Collection</td> <td></td> </tr> <tr> <td>Ward/Clinic</td> <td></td> <td>Doctor</td> <td></td> </tr> <tr> <td colspan="2">Batch number 123456</td> <td colspan="2">Expiry Date 03/06</td> </tr> </table>					<div style="border: 1px solid black; padding: 2px; display: inline-block;">  Urgent </div>	Fill Line	Anti-coagulant	Preservative (& name)		Patient Name		Date of Birth		Patient Number		Signature of Collector		Date of Collection		Time of Collection		Ward/Clinic		Doctor		Batch number 123456		Expiry Date 03/06	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">  Urgent </div>	Fill Line	Anti-coagulant	Preservative (& name)																										
	Patient Name		Date of Birth																										
	Patient Number		Signature of Collector																										
	Date of Collection		Time of Collection																										
	Ward/Clinic		Doctor																										
Batch number 123456		Expiry Date 03/06																											
13																													
					14																								
					16																								

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Patient Name	Date of Birth			
Patient Number	Signature of Collector			
Date of Collection	Time of Collection			
Ward/Clinic	Doctor			
Batch number 123456	Expiry Date 03/06			
Colour indicator anticoagulant preservative (if name) Fill Line				
Urgent Urgent Urgent Urgent Urgent Urgent				

16

13

18

14

FIG. 4A

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16

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Urgent Urgent

Patient Name	Date of Birth
Patient Number	Signature of Collector
Date of Collection	Time of Collection
Ward/Clinic	Doctor
Batch number 123456	Expiry Date 03/06
Fill Line	anticoagulant/ preservative (& name)

Urgent Urgent Urgent Urgent

FIG. 4B

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Patient Name	Date of Birth	Signature of Collector	Time of Collection	Doctor	Expiry Date 03/06						
Patient Number											
Date of Collection											
Ward/Clinic											
Batch number 123456											
<table border="1"> <tr> <td>Colour indicator</td> <td>Anti-coagulant</td> <td>Preservative (if name)</td> </tr> <tr> <td>Fill Line</td> <td></td> <td></td> </tr> </table>						Colour indicator	Anti-coagulant	Preservative (if name)	Fill Line		
Colour indicator	Anti-coagulant	Preservative (if name)									
Fill Line											
<table border="1"> <tr> <td>Urgent</td> <td>Urgent</td> <td>Urgent</td> <td>Urgent</td> <td>Urgent</td> <td>Urgent</td> </tr> </table>						Urgent	Urgent	Urgent	Urgent	Urgent	Urgent
Urgent	Urgent	Urgent	Urgent	Urgent	Urgent						

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18

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FIG. 4C

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Urgent	Urgent	Urgent	Urgent	Urgent												
<table border="1"> <tr> <td>Fill Line</td> <td>Anti-coagulant/Preservative (as name)</td> </tr> <tr> <td>Batch number 123456</td> <td>Expiry Date 03/06</td> </tr> <tr> <td>Ward/Clinic</td> <td>Doctor</td> </tr> <tr> <td>Date of Collection</td> <td>Time of Collection</td> </tr> <tr> <td>Patient Number</td> <td>Signature of Collector</td> </tr> <tr> <td>Patient Name</td> <td>Date of Birth</td> </tr> </table>					Fill Line	Anti-coagulant/Preservative (as name)	Batch number 123456	Expiry Date 03/06	Ward/Clinic	Doctor	Date of Collection	Time of Collection	Patient Number	Signature of Collector	Patient Name	Date of Birth
Fill Line	Anti-coagulant/Preservative (as name)															
Batch number 123456	Expiry Date 03/06															
Ward/Clinic	Doctor															
Date of Collection	Time of Collection															
Patient Number	Signature of Collector															
Patient Name	Date of Birth															
17	18	19	16	13												

FIG. 4D

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Urgent	Urgent	Urgent	Urgent	Urgent																				
<table border="1"> <tr> <td colspan="2">Fill Line</td> <td>AntiCoagulant</td> <td colspan="2">Preservative (if name)</td> </tr> <tr> <td>Patient Name</td> <td>Patient Number</td> <td>Date of Birth</td> <td colspan="2">Signature of Collector</td> </tr> <tr> <td>Date of Collection</td> <td>Ward/Clinic</td> <td>Time of Collection</td> <td colspan="2">Doctor</td> </tr> <tr> <td colspan="2">Batch number 123456</td> <td colspan="2">Expiry Date 03/06</td> <td></td> </tr> </table>					Fill Line		AntiCoagulant	Preservative (if name)		Patient Name	Patient Number	Date of Birth	Signature of Collector		Date of Collection	Ward/Clinic	Time of Collection	Doctor		Batch number 123456		Expiry Date 03/06		
Fill Line		AntiCoagulant	Preservative (if name)																					
Patient Name	Patient Number	Date of Birth	Signature of Collector																					
Date of Collection	Ward/Clinic	Time of Collection	Doctor																					
Batch number 123456		Expiry Date 03/06																						

18

14

13

16

FIG. 4E

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Patient Name	Date of Birth	Signature of Collector	16
Patient Number	Date of Collection	Time of Collection	
Date of Collection	Ward/Clinic	Doctor	
Batch number 123456	Expiry Date 03/06		
Color indicator	Anti-coagulant/	Anti-coagulant/	
Fill Line	preservative (if name)		
Urgent Urgent Urgent Urgent Urgent Urgent			18
			13
			14
			19
Urgent			FIG. 4F

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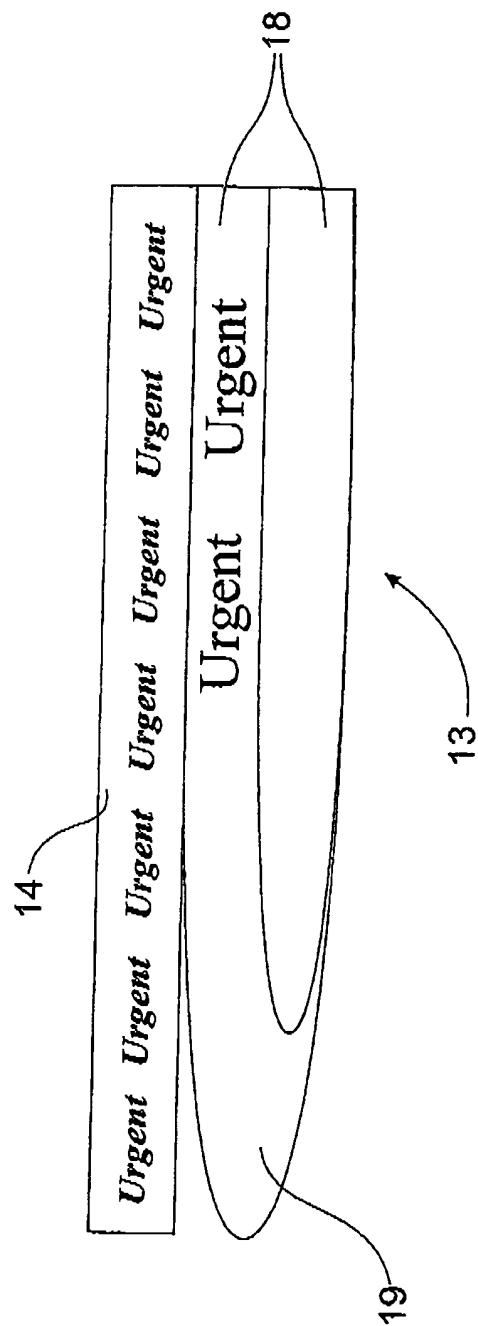


FIG. 5A

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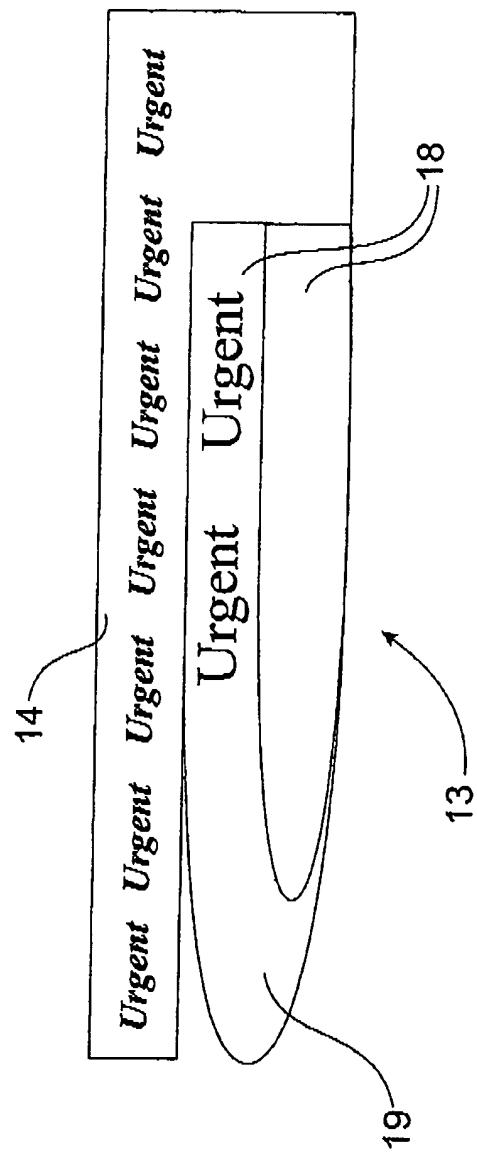


FIG. 5B